24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Right to Rise USA	
	C C00571372
Check if 24-hour report X 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Oath Strategies LLC	M M / D D / Y Y Y Y
Mailing Address P.O. Box 2484	10 05 2015 Amount
City State Zip Code	1695705.00
Springfield VA 22152	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	10 D D D D D D D D D D D D D D D D D D D
Name of Federal Candidate Support Offic	e Sought: House District:
Jeb Bush Oppose	President Senate State: IA
Calendar Year-To-Date Disb	ursement For: X Primary General
Per Election for Office Sought 3537519.68 2016	
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	Part of Birkers and an Ohlineting
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate	Cought: District
	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Tel Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	1695705.00
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	1695705.00
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	10 07 2015
Signature	